

**PAID**  
UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS

**MAY 08 2019**

JEFFREY P. ALLSTEADT, CLERK  
**INTAKE 1** ☒ Check if this is an amended filing

Fill in this information to identify your case:

Debtor 1	<u>Tina</u>	<u>J</u>	<u>Lane</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Illinois <input type="checkbox"/>			
Case number (If known)	<u>19-07449</u>		

**Official Form 106E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

- Do any creditors have priority unsecured claims against you?  
☐ No. Go to Part 2.  
☐ Yes.
- List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim      Priority amount      Nonpriority amount

2.1

Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number	Street	When was the debt incurred?		
City	State	ZIP Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.			<input type="checkbox"/> Contingent	
<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Disputed	
<input type="checkbox"/> Debtor 1 and Debtor 2 only			Type of PRIORITY unsecured claim:	
<input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Domestic support obligations	
<input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Taxes and certain other debts you owe the government	
Is the claim subject to offset?			<input type="checkbox"/> Claims for death or personal injury while you were intoxicated	
<input type="checkbox"/> No			<input type="checkbox"/> Other. Specify	
<input type="checkbox"/> Yes				

2.2

Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number	Street	When was the debt incurred?		
City	State	ZIP Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.			<input type="checkbox"/> Contingent	
<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Disputed	
<input type="checkbox"/> Debtor 1 and Debtor 2 only			Type of PRIORITY unsecured claim:	
<input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Domestic support obligations	
<input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Taxes and certain other debts you owe the government	
Is the claim subject to offset?			<input type="checkbox"/> Claims for death or personal injury while you were intoxicated	
<input type="checkbox"/> No			<input type="checkbox"/> Other. Specify	
<input type="checkbox"/> Yes				

Debtor 1

Tina

J

Document

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Case number (if known) 19-07449

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

**American Credit Acceptance**

Nonpriority Creditor's Name

PO BOX 204531

Number

Street

DALLAS

TX

75320

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ YesLast 4 digits of account number 3 4 1 3\$ 3,500.00When was the debt incurred? 02/01/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify AUTO LOAN**Purchasing Power**

Nonpriority Creditor's Name

1349 Peachtree Street NW Suite 1100

Number

Street

ATLANTA

GA

30309

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ YesLast 4 digits of account number 3 4 1 3\$ 3,000.00When was the debt incurred? 01/15/2018

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CREDIT ACCOUNT**Illinois Tollway**

Nonpriority Creditor's Name

2700 Odgen Ave

Number

Street

Downers Grove IL

60515

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ YesLast 4 digits of account number 3 4 1 3\$ 8,000.00When was the debt incurred? 1/15/2018

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify TOLL FEES